

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		43	2/17/01
FORMALITY REVIEW	KC	1019	03-05-01
RESPONSE FORMALITY REVIEW	T2	50947	05/29/01

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1	✓	7/3/04	
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50	✓		

Claim	Final	Original	Date
51	✓	7/23/04	
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100	✓		

Claim	Final	Original	Date
101	✓	7/23/04	
102	✓		
103	✓		
104	✓		
105	✓		
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
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4.5.  
3-5-01